

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

SCHAKOWSKY FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 5130

Check if different  
than previously  
reported. (ACC)

EVANSTON

IL

60204

2. FEC IDENTIFICATION NUMBER ▼

C C00327023

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

IL

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
03 18 2014in the  
State of

IL

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
01 01 2014

through

M M / D D / Y Y Y Y  
02 26 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Melanie Rovner Cohen

Signature of Treasurer

Melanie Rovner Cohen

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
03 03 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

**SCHAKOWSKY FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	60277.19	777464.38
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	655.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	60277.19	776809.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	71365.77	601547.22
(b) Total Offsets to Operating Expenditures (from Line 14).....	3000.00	9357.46
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	68365.77	592189.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	311439.20	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

**SCHAKOWSKY FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

43235.00

498437.84

**(ii) Unitemized.....**

2542.19

108221.06

**(iii) TOTAL of contributions from individuals ▶**

45777.19

606658.90

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

14500.00

170505.48

**(d) The Candidate.....**

0.00

300.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

60277.19

777464.38

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

3000.00

9357.46

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

66.53

965.37

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

63343.72

787787.21

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 64

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	71365.77	601547.22
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	655.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	655.00
21. OTHER DISBURSEMENTS .....	14200.00	208055.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	85565.77	810257.22

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	333661.25
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	63343.72
25. SUBTOTAL (add Line 23 and Line 24).....	397004.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	85565.77
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	311439.20

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 64

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Brian Bates**

Mailing Address 1225 W. Eddy Street

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Morrison Foerster

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
02 11 2014

Transaction ID : SA11AI.9929

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Susan M. Benton**

Mailing Address 2237 N. Magnolia Avenue

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Greensfelder Hemker Gale

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
02 26 2014

Transaction ID : SA11AI.10006

Amount of Each Receipt this Period

1100.00

Full Name (Last, First, Middle Initial)

**Susan M. Benton**

Mailing Address 2237 N. Magnolia Avenue

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Greensfelder Hemker Gale

Occupation

Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 26 2014

Transaction ID : SA11AI.10019

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional).....

1600.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Lieselotte Betterman**

Mailing Address 1506 Willow Lane

City

Mt. Prospect

State

IL

Zip Code

60056

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 19 / 2014

Transaction ID : SA11AI.9947

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Mary Bishop**

Mailing Address 634 Foster Street

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-employed

Occupation

Marketing

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 25 / 2014

Transaction ID : SA11AI.9988

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**Nancie Blatt**

Mailing Address 840 Audubon Way SV215

City

Lincolnshire

State

IL

Zip Code

60069

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-employed

Occupation

Community Volunteer

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4100.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 24 / 2014

Transaction ID : SA11AI.9962

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Gila Bronner**

Mailing Address 284 Prospect Avenue

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1900.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 08 / 2014

Transaction ID : SA11AI.10028

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**Gila Bronner**

Mailing Address 284 Prospect Avenue

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 08 / 2014

Transaction ID : SA11AI.10029

Amount of Each Receipt this Period

1100.00

Full Name (Last, First, Middle Initial)

**Velaine Carnall**

Mailing Address 5333 S. 7th Avenue

City

La Grange

State

IL

Zip Code

60525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 25 / 2014

Transaction ID : SA11AI.9976

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 64

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Rae Cecrle**

Mailing Address 1232 W. Bryn Mawr

City

Chicago

State

IL

Zip Code

60660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

B&amp;R Developers

Occupation

Owner

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		25		2014

Transaction ID : SA11AI.9974

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Chapman & Cutler**

Mailing Address 111 West Monroe

City

Chicago

State

IL

Zip Code

60603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		26		2014

Transaction ID : SA11AI.9893

Amount of Each Receipt this Period

1100.00

Full Name (Last, First, Middle Initial)

**Andrea Bacon**

Mailing Address 111 West Monroe

City

Chicago

State

IL

Zip Code

60603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Chapman &amp; Cutler

Occupation

Attorney

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		26		2014

Transaction ID : SA11AI.9893.0

Amount of Each Receipt this Period

1100.00

Partner - Chapman &amp; Cutler

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00
---------



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 64

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Chapman &amp; Cutler</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014	
Mailing Address 111 West Monroe		<b>Transaction ID : SA11AI.9894</b>	
City Chicago	State IL	Zip Code 60603	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer  	Occupation  		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Andrea Bacon</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014	
Mailing Address 111 West Monroe		<b>Transaction ID : SA11AI.9894.0</b>	
City Chicago	State IL	Zip Code 60603	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer Chapman & Cutler	Occupation Attorney		Partner - Chapman & Cutler <b>[MEMO ITEM]</b>
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Doris Conant</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 7346 Green Acres		<b>Transaction ID : SA11AI.10063</b>	
City Glenview	State IL	Zip Code 60025	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1900.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		800.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Doris Conant**

Mailing Address 7346 Green Acres

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 29 / 2014

Transaction ID : SA11AI.10065

Amount of Each Receipt this Period

1100.00

Full Name (Last, First, Middle Initial)

**R. Sue Connolly**

Mailing Address 1618 W. Rosehill Drive

City

Chicago

State

IL

Zip Code

60660

FEC ID number of contributing federal political committee.

C

Name of Employer

MKMB Restaurant Partners

Occupation

CFO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 25 / 2014

Transaction ID : SA11AI.9980

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Anne Megan Davis**

Mailing Address 838 W. Belden

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing federal political committee.

C

Name of Employer

Johnson Jones Snelling Gilbert

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 18 / 2014

Transaction ID : SA11AI.9933

Amount of Each Receipt this Period

1100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2300.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Anne Megan Davis**

Mailing Address 838 W. Belden

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing federal political committee.

C

Name of Employer

Johnson Jones Snelling Gilbert

Occupation

Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 18 / 2014

Transaction ID : SA11AI.9937

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**Jodi Doane**

Mailing Address 4758 S. King Drive #4

City

Chicago

State

IL

Zip Code

60615

FEC ID number of contributing federal political committee.

C

Name of Employer

Parents Anonymous

Occupation

Social Worker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 21 / 2014

Transaction ID : SA11AI.10057

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**Richard Doub**

Mailing Address 1500 Sheridan Road Apt. 3E

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 19 / 2014

Transaction ID : SA11AI.9952

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

650.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Sharon Eiseman**

Mailing Address 4236 N. Ashland Avenue #1

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing federal political committee.

C

Name of Employer

State of Illinois

Occupation

Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2400.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 03 / 2014

Transaction ID : SA11AI.9907

Amount of Each Receipt this Period

650.00

Full Name (Last, First, Middle Initial)

**Sharon Eiseman**

Mailing Address 4236 N. Ashland Avenue #1

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing federal political committee.

C

Name of Employer

State of Illinois

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3250.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 03 / 2014

Transaction ID : SA11AI.9908

Amount of Each Receipt this Period

850.00

Full Name (Last, First, Middle Initial)

**Janet Fisher**

Mailing Address 2100 N. Lincoln Park West, #8-DN

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 10 / 2014

Transaction ID : SA11AI.10032

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Barbara French**

Mailing Address 741 S. Cass Street

City

Virginia

State

IL

Zip Code

62691

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-employed

Occupation

Community Volunteer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

262.50

Date of Receipt

M M / D D / Y Y Y Y  
02 / 04 / 2014

Transaction ID : SA11AI.9919

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**Anna Giannoulis**

Mailing Address 6007 North Sheridan Road

City

Chicago

State

IL

Zip Code

60660

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1900.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 21 / 2014

Transaction ID : SA11AI.10020

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**Anna Giannoulis**

Mailing Address 6007 North Sheridan Road

City

Chicago

State

IL

Zip Code

60660

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 21 / 2014

Transaction ID : SA11AI.10058

Amount of Each Receipt this Period

1100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1700.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Edward Gogol**

Mailing Address 835 Arbor Lane

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-employed

Occupation

Agriculture/Writer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

381.25

Date of Receipt

M M / D D / Y Y Y Y  
02 / 19 / 2014

Transaction ID : SA11AI.9958

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**Jerold Graff**

Mailing Address 15 Calvin Circle

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 04 / 2014

Transaction ID : SA11AI.9922

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Alice Gutenkauf**

Mailing Address 8425 N. Mason Avenue

City

Morton Grove

State

IL

Zip Code

60053

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

412.50

Date of Receipt

M M / D D / Y Y Y Y  
02 / 19 / 2014

Transaction ID : SA11AI.9945

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

375.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 64

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Susan Gzesh**

Mailing Address 5830 South Stony Island, #15A

City

Chicago

State

IL

Zip Code

60637

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of Chicago

Occupation

Lecturer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M / D D / Y Y Y Y  
01 13 2014

Transaction ID : SA11AI.10035

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Joan Hall**

Mailing Address 209 East Lake Shore Drive

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
02 26 2014

Transaction ID : SA11AI.9994

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. James Kaplan**

Mailing Address 1801 Tower Drive, E222

City

Glenview

State

IL

Zip Code

60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Illinois

Occupation

Judge

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

650.00

Date of Receipt

M M / D D / Y Y Y Y  
02 26 2014

Transaction ID : SA11AI.9989

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1050.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

PAGE 16 OF 64

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Alan Kimmel</b>			Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014	
Mailing Address 6947 N. Ridge Blvd.			<b>Transaction ID : SA11AI.9972</b>	
City	State	Zip Code	Amount of Each Receipt this Period _____ 500.00	
Chicago	IL	60645		
FEC ID number of contributing federal political committee.		C _____		
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 650.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>James Klutznick</b>			Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 1260 Astor Street			<b>Transaction ID : SA11AI.9911</b>	
City	State	Zip Code	Amount of Each Receipt this Period _____ 400.00	
Chicago	IL	60610	Conduit: J Street PAC	
FEC ID number of contributing federal political committee.		C _____		
Name of Employer Senior Lifestyle Corp.		Occupation Real Estate		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 1900.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>James Klutznick</b>			Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 1260 Astor Street			<b>Transaction ID : SA11AI.9912</b>	
City	State	Zip Code	Amount of Each Receipt this Period _____ 1100.00	
Chicago	IL	60610	Conduit: J Street PAC	
FEC ID number of contributing federal political committee.		C _____		
Name of Employer Senior Lifestyle Corp.		Occupation Real Estate		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 3000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			_____ 2000.00	
<b>TOTAL</b> This Period (last page this line number only).....			_____	



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Judy Klutznick**

Mailing Address 1260 N. Astor

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-employed

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 04 / 2014

Transaction ID : SA11AI.9910

Amount of Each Receipt this Period

1500.00

Conduit: J Street PAC

Full Name (Last, First, Middle Initial)

**Astri Lindberg**

Mailing Address 2896 Sheridan Place

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4275.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 11 / 2014

Transaction ID : SA11AI.9927

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

**Astri Lindberg**

Mailing Address 2896 Sheridan Place

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5025.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 26 / 2014

Transaction ID : SA11AI.9997

Amount of Each Receipt this Period

750.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 64

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Sharon Lindstrom**

Mailing Address 2020 Lincoln Park West,North 34-H

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Protiviti

Occupation

Consultant

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 13 / 2014

Transaction ID : SA11AI.10033

Amount of Each Receipt this Period

1100.00

Full Name (Last, First, Middle Initial)

**Sharon Lindstrom**

Mailing Address 2020 Lincoln Park West,North 34-H

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Protiviti

Occupation

Consultant

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 13 / 2014

Transaction ID : SA11AI.10034

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**Stephen Mack**

Mailing Address 1995 Selkirk Ct.

City

Inverness

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LaSalle Bank Corporation

Occupation

Auditor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 19 / 2014

Transaction ID : SA11AI.9951

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Susan Manilow**

Mailing Address 65 East Goethe Street

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-employed

Occupation

Philanthropist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 11 / 2014

Transaction ID : SA11AI.9926

Amount of Each Receipt this Period

1100.00

Full Name (Last, First, Middle Initial)

**Susan Manilow**

Mailing Address 65 East Goethe Street

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-employed

Occupation

Philanthropist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 11 / 2014

Transaction ID : SA11AI.9928

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**Martha Mills**

Mailing Address 1021 W. Bryn Mawr

City

Chicago

State

IL

Zip Code

60660

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1900.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 29 / 2014

Transaction ID : SA11AI.10067

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1900.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Martha Mills**

Mailing Address 1021 W. Bryn Mawr

City

Chicago

State

IL

Zip Code

60660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 29 / 2014

Transaction ID : SA11AI.10068

Amount of Each Receipt this Period

1100.00

Full Name (Last, First, Middle Initial)

**Michael Mitzen**

Mailing Address 200 East Delaware Place #29B

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Universal American Financial Co.

Occupation

Manager

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1900.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 08 / 2014

Transaction ID : SA11AI.10026

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**Michael Mitzen**

Mailing Address 200 East Delaware Place #29B

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Universal American Financial Co.

Occupation

Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 08 / 2014

Transaction ID : SA11AI.10027

Amount of Each Receipt this Period

1100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2600.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 21 OF 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Catherine Moran**

Mailing Address 4713 N. LaPorte

City

Chicago

State

IL

Zip Code

60630

FEC ID number of contributing federal political committee.

C

Name of Employer

SAP

Occupation

Global Software Co.

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		18		2014

Transaction ID : SA11AI.9934

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Catherine Moran**

Mailing Address 4713 N. LaPorte

City

Chicago

State

IL

Zip Code

60630

FEC ID number of contributing federal political committee.

C

Name of Employer

SAP

Occupation

Global Software Co.

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		18		2014

Transaction ID : SA11AI.9935

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Gail H Morse**

Mailing Address 3739 N. Wilton Ave. #2

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing federal political committee.

C

Name of Employer

Jenner &amp; Block

Occupation

Attorney

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		26		2014

Transaction ID : SA11AI.10004

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

800.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**William Muenster**

Mailing Address 901 Hinman Apt 5E

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 19 / 2014

Transaction ID : SA11AI.9948

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**Grace Allen Newton**

Mailing Address 2135 N. Cleveland

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-employed

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3100.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 15 / 2014

Transaction ID : SA11AI.9932

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Grace Allen Newton**

Mailing Address 2135 N. Cleveland

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-employed

Occupation

Lawyer

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 24 / 2014

Transaction ID : SA11AI.9963

Amount of Each Receipt this Period

2100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Lenin Pellegrino**

Mailing Address 2548 N. Halsted

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kingston Mines

Occupation

Proprietor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 25 2014

Transaction ID : SA11AI.9973

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Linda Relias**

Mailing Address 95 Indian Hill Road

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y  
02 25 2014

Transaction ID : SA11AI.9985

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Michael Rothman**

Mailing Address 2202 N. Orchard Street

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Futures Trader

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3600.00

Date of Receipt

M M / D D / Y Y Y Y  
02 26 2014

Transaction ID : SA11AI.10005

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1600.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:

PAGE 24 OF 64

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Bettylu Saltzman

Mailing Address 415 E. North Water Street #W605-6

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Activist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		21		2014

Transaction ID : SA11AI.10059

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Bettylu Saltzman

Mailing Address 415 E. North Water Street #W605-6

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Activist

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10070

Amount of Each Receipt this Period

700.00

Full Name (Last, First, Middle Initial)

C. Paul Saltzman

Mailing Address 415 E. North Water St #W605/606

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Union Medical Center

Occupation

Physician

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		29		2014

Transaction ID : SA11AI.10069

Amount of Each Receipt this Period

800.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Clyde Selleck</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 21 / 2014	
Mailing Address 501 Chamblee Blvd.		<b>Transaction ID : SA11AI.10039</b>	
City Greenville	State SC	Zip Code 29615	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Michelin North America, Inc.	Occupation Chairman and President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Naomi Sensor</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 55 South Deere Park Drive		<b>Transaction ID : SA11AI.10066</b>	
City Highland Park	State IL	Zip Code 60035	Amount of Each Receipt this Period 1100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed	Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Naomi Sensor</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 55 South Deere Park Drive		<b>Transaction ID : SA11AI.10071</b>	
City Highland Park	State IL	Zip Code 60035	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed	Occupation Homemaker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		2500.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Joan Shapiro</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 10 / 2014	
Mailing Address 5614 S. Dorchester		<b>Transaction ID : SA11AI.10031</b>	
City Chicago	State IL	Zip Code 60637	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Seer Analytics	Occupation Consultant/Entrepreneur		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1900.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Karen Shields</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014	
Mailing Address 405 N. Wabash, Apt. 4909		<b>Transaction ID : SA11AI.9990</b>	
City Chicago	State IL	Zip Code 60622	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed	Occupation Mediator		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Ellen Stone-Belic</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 418 W. Webster		<b>Transaction ID : SA11AI.9920</b>	
City Chicago	State IL	Zip Code 60614	Amount of Each Receipt this Period 750.00
FEC ID number of contributing federal political committee. C			
Name of Employer Columbia College	Occupation Professor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		2000.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mary Stowell**

Mailing Address 301 Woodley Road

City

Winnetka

State

IL

Zip Code

60693

FEC ID number of contributing federal political committee.

C

Name of Employer

Stowell &amp; Freidman

Occupation

Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 03 / 2014

Transaction ID : SA11AI.10021

Amount of Each Receipt this Period

2200.00

Full Name (Last, First, Middle Initial)

**Marjorie Tick**

Mailing Address 2550 Harbourside Drive

City

Longboat Key

State

FL

Zip Code

34228

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 25 / 2014

Transaction ID : SA11AI.9970

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Rikke Vognsen**

Mailing Address 3816 North Marshfield Avenue

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing federal political committee.

C

Name of Employer

Crown Advisors

Occupation

Executive Search

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

375.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 22 / 2014

Transaction ID : SA11AI.10062

Amount of Each Receipt this Period

5.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2305.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Rikke Vognsen**

Mailing Address 3816 North Marshfield Avenue

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing federal political committee.

C

Name of Employer

Crown Advisors

Occupation

Executive Search

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

380.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 22 / 2014

Transaction ID : SA11AI.10011

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**Stephen Warner**

Mailing Address 1201 Harvard Terrace

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing federal political committee.

C

Name of Employer

Woodward

Occupation

Engineer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 19 / 2014

Transaction ID : SA11AI.9950

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Margaret Warren**

Mailing Address 19 N. Delphia

City

Park Ridge

State

IL

Zip Code

60068

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 25 / 2014

Transaction ID : SA11AI.9964

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

305.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Julia R. Weertman**

Mailing Address 834 Lincoln St.

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Northwestern University

Occupation

Professor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		25		2014

Transaction ID : SA11AI.9969

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**David Weinberg**

Mailing Address 2135 N. Cleveland

City

Chicago IL

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Photographer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		26		2014

Transaction ID : SA11AI.10008

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

**Robert J. Williamson**

Mailing Address 2131 Quartz Mountain Way

City

South Woodstock

State

VT

Zip Code

05071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		04		2014

Transaction ID : SA11AI.9917

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

43235.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>ACTBLUE</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address P.O. BOX 382110		Transaction ID : SA11C.9891
City CAMBRIDGE	State MA	
FEC ID number of contributing federal political committee. C C00401224		Amount of Each Receipt this Period 104.19
Name of Employer	Occupation	Total Received Through Conduit This Period
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>Carpenters Legislative Improvement Committee</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 101 Constitution Ave., NW		Transaction ID : SA11C.9904
City Washington	State DC	
FEC ID number of contributing federal political committee. C C00001016		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00	

Full Name (Last, First, Middle Initial) <b>Duane Morris Government Committee</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 30 South 17th Street		Transaction ID : SA11C.9902
City Philadelphia	State PA	
FEC ID number of contributing federal political committee. C C00364133		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6500.00
<b>TOTAL</b> This Period (last page this line number only).....	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Intl. Brotherhood of Boilermakers Campaign Assistance Fund**

Mailing Address 753 State Avenue #565

City State Zip Code  
Kansas City KS 06610

FEC ID number of contributing  
federal political committee.

**C** C00005157

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 26 2014

**Transaction ID : SA11C.9903**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. JSTREETPAC**

Mailing Address PO BOX 33106

City State Zip Code  
WASHINGTON DC 20033

FEC ID number of contributing  
federal political committee.

**C** C00441949

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y  
02 26 2014

**Transaction ID : SA11C.9892**

Amount of Each Receipt this Period

3025.00

Total Received Through Conduit This Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. National Beer Wholesalers Assn PAC**

Mailing Address 1101 King Street, Suite 600

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00144766

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 19 2014

**Transaction ID : SA11C.9900**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>United Auto Workers VCAP</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014	
Mailing Address 8000 East Jefferson Avenue		<b>Transaction ID : SA11C.9901</b>	
City Detroit	State MI	Zip Code 48214	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C C00002840			
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		
<b>B.</b> Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		2000.00	
<b>TOTAL</b> This Period (last page this line number only).....		14500.00	



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**IL Democratic County Chairmen's Association**

Mailing Address P.O. Box 3445

City

Springfield

State

IL

Zip Code

60728

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

General

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2014

Transaction ID : SA14.9898

Amount of Each Receipt this Period

3000.00

Refund for Voter File Payment 11/27/12

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 OF 64

☐ 11a ☐ 11b ☐ 11c ☐ 11d ☒ 15  
12 13a 13b 14

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Franklin Templeton Investments**

Mailing Address PO Box 33030

City

St. Petersburg

State

FL

Zip Code

33733

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

371.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 03 2014

Transaction ID : SA15.9887

Amount of Each Receipt this Period

28.54

Interest

Full Name (Last, First, Middle Initial)

**Franklin Templeton Investments**

Mailing Address PO Box 33030

City

St. Petersburg

State

FL

Zip Code

33733

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

396.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 04 2014

Transaction ID : SA15.9889

Amount of Each Receipt this Period

25.11

Interest

Full Name (Last, First, Middle Initial)

**C.**  
Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

53.65

53.65

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 64

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 100 N. Northwest Pt. Road

City	State	Zip Code
Elk Grove Village	IL	60007

Purpose of Disbursement  
Payroll Processing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

92.98
-------

Transaction ID : SB17.9820

**B. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 100 N. Northwest Pt. Road

City	State	Zip Code
Elk Grove Village	IL	60007

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2014

Amount of Each Disbursement this Period

1834.09
---------

Transaction ID : SB17.9821

**C. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 100 N. Northwest Pt. Road

City	State	Zip Code
Elk Grove Village	IL	60007

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2014

Amount of Each Disbursement this Period

874.69
--------

Transaction ID : SB17.9822

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2801.76

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 64

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		17		2014

City	State	Zip Code
Elk Grove Village	IL	60007

Amount of Each Disbursement this Period

92.98
-------

Purpose of Disbursement  
Payroll ProcessingCategory/  
Type**Transaction ID : SB17.9824**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2014

City	State	Zip Code
Elk Grove Village	IL	60007

Amount of Each Disbursement this Period

67.00
-------

Purpose of Disbursement  
Payroll ProcessingCategory/  
Type**Transaction ID : SB17.9825**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 100 N. Northwest Pt. Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

City	State	Zip Code
Elk Grove Village	IL	60007

Amount of Each Disbursement this Period

92.98
-------

Purpose of Disbursement  
Payroll ProcessingCategory/  
Type**Transaction ID : SB17.9826**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

252.96

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 64

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 100 N. Northwest Pt. Road

City	State	Zip Code
Elk Grove Village	IL	60007

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

Amount of Each Disbursement this Period

752.19
--------

Transaction ID : SB17.9823

**B. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 100 N. Northwest Pt. Road

City	State	Zip Code
Elk Grove Village	IL	60007

Purpose of Disbursement  
Payroll Processing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

Amount of Each Disbursement this Period

92.98
-------

Transaction ID : SB17.9827

**C. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 100 N. Northwest Pt. Road

City	State	Zip Code
Elk Grove Village	IL	60007

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2014

Amount of Each Disbursement this Period

684.69
--------

Transaction ID : SB17.9829

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1529.86

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 64

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 100 N. Northwest Pt. Road

City	State	Zip Code
Elk Grove Village	IL	60007

Purpose of Disbursement  
Payroll Processing

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		21		2014

Amount of Each Disbursement this Period

92.98
-------

Transaction ID : SB17.9828

**B. American Express**

Mailing Address P.O. Box 981540

City	State	Zip Code
El Paso	TX	79998

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

61.14
-------

Transaction ID : SB17.9830

**c. American Express**

Mailing Address P.O. Box 981540

City	State	Zip Code
El Paso	TX	79998

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

17.50
-------

Transaction ID : SB17.9832

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

171.62

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 OF 64

☒ 17    ☐ 18    ☐ 19a    ☐ 19b  
☐ 20a    ☐ 20b    ☐ 20c    ☐ 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address P.O. Box 981540

City State Zip Code  
 El Paso TX 79998

Purpose of Disbursement  
 Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 02 / 05 / 2014

Amount of Each Disbursement this Period

132.25

Transaction ID : SB17.9831

## **B. Armour, Alex**

Mailing Address 1940 W. Lawrence #3W

City State Zip Code  
 Chicago IL 60640

Purpose of Disbursement  
 Salary

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 01 / 15 / 2014

Amount of Each Disbursement this Period

2708.33

Transaction ID : SB17.9834

## **C. Armour, Alex**

Mailing Address 1940 W. Lawrence #3W

City State Zip Code  
 Chicago IL 60640

Purpose of Disbursement  
 Salary

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
 01 / 19 / 2014

Amount of Each Disbursement this Period

5416.66

Transaction ID : SB17.9833

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8257.24

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 64

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Armour, Alex**

Mailing Address 1940 W. Lawrence #3W

City	State	Zip Code
Chicago	IL	60640

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

Amount of Each Disbursement this Period

2708.33
---------

Transaction ID : SB17.9835

**B. Armour, Alex**

Mailing Address 1940 W. Lawrence #3W

City	State	Zip Code
Chicago	IL	60640

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2014

Amount of Each Disbursement this Period

2708.33
---------

Transaction ID : SB17.9836

**C. AT&T**

Mailing Address 208 Akard Street

City	State	Zip Code
Dallas	TX	75202

Purpose of Disbursement  
Telephone & Internet Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2014

Amount of Each Disbursement this Period

444.76
--------

Transaction ID : SB17.9837

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5861.42



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 64

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 208 Akard Street

City	State	Zip Code
Dallas	TX	75202

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

45.00
-------

Transaction ID : SB17.9838

**B. AT&T**

Mailing Address 208 Akard Street

City	State	Zip Code
Dallas	TX	75202

Purpose of Disbursement  
Telephone & Internet Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

445.71
--------

Transaction ID : SB17.9840

**C. AT&T**

Mailing Address 208 Akard Street

City	State	Zip Code
Dallas	TX	75202

Purpose of Disbursement  
Telephone & Internet Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2014

Amount of Each Disbursement this Period

25.00
-------

Transaction ID : SB17.9839

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

515.71

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 64

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AT&T Mobility**

Mailing Address 208 Akard Street

City	State	Zip Code
Dallas	TX	75202

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

691.62
--------

Transaction ID : SB17.9841

**B. AT&T Mobility**

Mailing Address 208 Akard Street

City	State	Zip Code
Dallas	TX	75202

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

Amount of Each Disbursement this Period

702.15
--------

Transaction ID : SB17.9842

**c. Authorize.net**

Mailing Address 915 S. 500 East #200

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

32.45
-------

Transaction ID : SB17.9843

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1426.22

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 64

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Authorize.net**

Mailing Address 915 S. 500 East #200

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 04 / 2014

Amount of Each Disbursement this Period

33.80
-------

Transaction ID : SB17.9844

**B. Blue Cross Blue Shield of IL**

Mailing Address PO Box 1364

City	State	Zip Code
Chicago	IL	60690

Purpose of Disbursement  
Health Insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 11 / 2014

Amount of Each Disbursement this Period

1352.86
---------

Transaction ID : SB17.9845

**C. Chase Card Services**

Mailing Address PO Box 53084

City	State	Zip Code
Atlanta	GA	30353

Purpose of Disbursement  
Itemized Disbursements Below

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 13 / 2014

Amount of Each Disbursement this Period

7298.21
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Transaction ID : SB17.9758

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8684.87

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. U.S. Postal Service**

Mailing Address 1101 Davis

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

City	State	Zip Code
Evanston	IL	60201

Amount of Each Disbursement this Period

1064.11
---------

Purpose of Disbursement  
PostageCategory/  
Type

Transaction ID : SB17.9758.1

**[MEMO ITEM]**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 4610 North Clark Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

City	State	Zip Code
Chicago	IL	60640

Amount of Each Disbursement this Period

62.26
-------

Purpose of Disbursement  
Office SuppliesCategory/  
Type

Transaction ID : SB17.9758.2

**[MEMO ITEM]**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. House of Rental**

Mailing Address 5115 Church Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

City	State	Zip Code
Skokie	IL	60077

Amount of Each Disbursement this Period

37.50
-------

Purpose of Disbursement  
Equipment RentalCategory/  
Type

Transaction ID : SB17.9758.3

**[MEMO ITEM]**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Jewel**

Mailing Address 1128 Chicago

City	State	Zip Code
Evanston	IL	60202

Purpose of Disbursement  
Food, Beverage and Supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

105.70
--------

Transaction ID : SB17.9758.4

**[MEMO ITEM]****B. Constant Contact**

Mailing Address 1601 Trapelo Road #329

City	State	Zip Code
Waltham	MA	02451

Purpose of Disbursement  
Email Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

79.69
-------

Transaction ID : SB17.9758.5

**[MEMO ITEM]****C. J2Fax**

Mailing Address 6922 Hollywood Blvd. 5th Floor

City	State	Zip Code
Los Angeles	CA	90028

Purpose of Disbursement  
Fax Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

16.95
-------

Transaction ID : SB17.9758.10

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 64

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Prairie Moon**

Mailing Address 1502 Sherman Avenue

City	State	Zip Code
Evanston	IL	60201

Purpose of Disbursement  
Food and Beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

177.10
--------

Transaction ID : SB17.9758.13

**[MEMO ITEM]****B. CVS**

Mailing Address 661 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Campaign Event Cards

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

763.40
--------

Transaction ID : SB17.9758.16

**[MEMO ITEM]****c. The Liaison**

Mailing Address 415 New Jersey Avenue NW

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

1212.60
---------

Transaction ID : SB17.9758.17

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Target**

Mailing Address 1154 S. Clark Street

City	State	Zip Code
Chicago	IL	60605

Purpose of Disbursement  
Campaign Event Cards

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

863.05
--------

Transaction ID : SB17.9758.21

**[MEMO ITEM]****B. Pita Inn**

Mailing Address 3910 Dempster S

City	State	Zip Code
Skokie	IL	60076

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

1020.55
---------

Transaction ID : SB17.9758.22

**[MEMO ITEM]****c. Wired for Change**

Mailing Address 1700 Connecticut Ave NW #403

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement  
Website Maintenance

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

1050.00
---------

Transaction ID : SB17.9758.24

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AOL**

Mailing Address 770 Broadway

City	State	Zip Code
New York	NY	10003

Purpose of Disbursement  
Internet Service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

3259.01
---------

Transaction ID : SB17.9758.25

**[MEMO ITEM]****B. Chase Card Services**

Mailing Address PO Box 53084

City	State	Zip Code
Atlanta	GA	30353

Purpose of Disbursement  
Itemized Disbursements Below

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

3259.01
---------

Transaction ID : SB17.9794

**c. Staples**

Mailing Address 4610 North Clark Street

City	State	Zip Code
Chicago	IL	60640

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

10.70
-------

Transaction ID : SB17.9794.0

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3259.01



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Constant Contact**

Mailing Address 1601 Trapelo Road #329

City	State	Zip Code
Waltham	MA	02451

Purpose of Disbursement  
Email Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

79.69
-------

Transaction ID : SB17.9794.1

**[MEMO ITEM]****B. Servint Corp**

Mailing Address 6861 Elm Street 4th Floor

City	State	Zip Code
McLean	VA	22101

Purpose of Disbursement  
Website Hosting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

147.00
--------

Transaction ID : SB17.9794.2

**[MEMO ITEM]****C. J2Fax**

Mailing Address 6922 Hollywood Blvd. 5th Floor

City	State	Zip Code
Los Angeles	CA	90028

Purpose of Disbursement  
Fax Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

16.95
-------

Transaction ID : SB17.9794.3

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Chicago Hilton Garage**

Mailing Address 720 S. Michigan

City	State	Zip Code
Chicago	IL	60605

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

31.00
-------

Transaction ID : SB17.9794.6

**[MEMO ITEM]****B. U.S. Postal Service**

Mailing Address 1101 Davis

City	State	Zip Code
Evanston	IL	60201

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

229.75
--------

Transaction ID : SB17.9794.7

**[MEMO ITEM]****c. East Bank Club**

Mailing Address 500 N. Kingsbury

City	State	Zip Code
Chicago	IL	60610

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

1421.75
---------

Transaction ID : SB17.9794.8

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Faith and Poitics Institute**

Mailing Address 110 Maryland Avenue NE #504

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
Washington	DC	20002

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Event AdmissionsCategory/  
Type

Transaction ID : SB17.9794.10

**[MEMO ITEM]**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Costco**

Mailing Address 7311 N. Melvina Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
Niles	IL	60714

Amount of Each Disbursement this Period

265.61
--------

Purpose of Disbursement  
Office SuppliesCategory/  
Type

Transaction ID : SB17.9794.11

**[MEMO ITEM]**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. AOL**

Mailing Address 770 Broadway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
New York	NY	10003

Amount of Each Disbursement this Period

17.95
-------

Purpose of Disbursement  
Internet ServiceCategory/  
Type

Transaction ID : SB17.9794.12

**[MEMO ITEM]**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Wired for Change**

Mailing Address 1700 Connecticut Ave NW #403

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
Washington	DC	20009

Amount of Each Disbursement this Period

350.00
--------

Purpose of Disbursement  
Website MaintenanceCategory/  
Type

Transaction ID : SB17.9794.13

**[MEMO ITEM]**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Federal Express**

Mailing Address 942 Shady Grove Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
Memphis	TN	38120

Amount of Each Disbursement this Period

25.50
-------

Purpose of Disbursement  
ShippingCategory/  
Type

Transaction ID : SB17.9794.14

**[MEMO ITEM]**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Chicago Rabbinical Council**

Mailing Address 2701 W Howard St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2014

City	State	Zip Code
Chicago	IL	60646

Amount of Each Disbursement this Period

121.50
--------

Purpose of Disbursement  
AdvertisementCategory/  
Type

Transaction ID : SB17.9846

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

121.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Citizen Action Illinois**

Mailing Address 28 E. Jackson Blvd., #605

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

City	State	Zip Code
Chicago	IL	60604

Purpose of Disbursement  
Membership Dues

Amount of Each Disbursement this Period

3226.25
---------

Transaction ID : SB17.9847

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Deluxe Corporation**

Mailing Address 3660 Victoria Street N.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

City	State	Zip Code
Shoreview	MN	55126

Purpose of Disbursement  
Banking Supplies

Amount of Each Disbursement this Period

76.25
-------

Transaction ID : SB17.9848

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Democratic Party of Illinois**

Mailing Address P.O. Box 518

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

City	State	Zip Code
Springfield	IL	62705

Purpose of Disbursement  
Voter File

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : SB17.9850

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3226.25

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 64

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Des Plaines Chamber of Commerce**

Mailing Address 1401 E Oakton St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

City	State	Zip Code
Des Plaines	IL	60018

Amount of Each Disbursement this Period

235.00
--------

Purpose of Disbursement  
Membership DuesCategory/  
Type**Transaction ID : SB17.9851**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Diamond Marketing Solutions**

Mailing Address 280 Madsen Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

City	State	Zip Code
Bloomington	IL	60108

Amount of Each Disbursement this Period

3101.47
---------

Purpose of Disbursement  
Mailing ExpensesCategory/  
Type**Transaction ID : SB17.9852**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Gersten, Sarah**

Mailing Address 3909 N. Sheridan #1H

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2014

City	State	Zip Code
Chicago	IL	60613

Amount of Each Disbursement this Period

8000.00
---------

Purpose of Disbursement  
SalaryCategory/  
Type**Transaction ID : SB17.9855**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

11336.47

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Gersten, Sarah**

Mailing Address 3909 N. Sheridan #1H

City	State	Zip Code
Chicago	IL	60613

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2014

Amount of Each Disbursement this Period

3875.00
---------

Transaction ID : SB17.9854

**B. Gersten, Sarah**

Mailing Address 3909 N. Sheridan #1H

City	State	Zip Code
Chicago	IL	60613

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

Amount of Each Disbursement this Period

3875.00
---------

Transaction ID : SB17.9856

**c. Gersten, Sarah**

Mailing Address 3909 N. Sheridan #1H

City	State	Zip Code
Chicago	IL	60613

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2014

Amount of Each Disbursement this Period

3875.00
---------

Transaction ID : SB17.9853

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

11625.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Hilton Chicago**

Mailing Address 720 S. Michigan

City	State	Zip Code
Chicago	IL	60605

Purpose of Disbursement  
Catering Deposit

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

2500.00
---------

Transaction ID : SB17.9857

**B. J Street PAC**

Mailing Address P.O. Box 33106

City	State	Zip Code
Washington	DC	20033

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

97.50
-------

Transaction ID : SB17.9897

**c. J Street PAC**

Mailing Address P.O. Box 33106

City	State	Zip Code
Washington	DC	20033

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		26		2014

Amount of Each Disbursement this Period

0.81
------

Transaction ID : SB17.9858

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2598.31



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Keshet**

Mailing Address 425 Huehl Rd. #13B

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2014

City	State	Zip Code
Northbrook	IL	60062

Amount of Each Disbursement this Period

300.00
--------

Purpose of Disbursement  
Event TicketsCategory/  
Type**Transaction ID : SB17.9859**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Mid-City Printing**

Mailing Address 5526 W. Montrose

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

City	State	Zip Code
Chicago	IL	60641

Amount of Each Disbursement this Period

1940.00
---------

Purpose of Disbursement  
PrintingCategory/  
Type**Transaction ID : SB17.9860**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Moneris**

Mailing Address 700 E. Lake Cook Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

City	State	Zip Code
Buffalo Grove	IL	60089

Amount of Each Disbursement this Period

98.97
-------

Purpose of Disbursement  
Credit Card Processing FeesCategory/  
Type**Transaction ID : SB17.9861**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2338.97

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Moneris**

Mailing Address 700 E. Lake Cook Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

City	State	Zip Code
Buffalo Grove	IL	60089

Amount of Each Disbursement this Period

632.94
--------

Purpose of Disbursement  
Credit Card Processing FeesCategory/  
Type

Transaction ID : SB17.9862

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Moneris**

Mailing Address 700 E. Lake Cook Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

City	State	Zip Code
Buffalo Grove	IL	60089

Amount of Each Disbursement this Period

70.18
-------

Purpose of Disbursement  
Credit Card Processing FeesCategory/  
Type

Transaction ID : SB17.9863

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Moneris**

Mailing Address 700 E. Lake Cook Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

City	State	Zip Code
Buffalo Grove	IL	60089

Amount of Each Disbursement this Period

297.49
--------

Purpose of Disbursement  
Credit Card Processing FeesCategory/  
Type

Transaction ID : SB17.9864

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.61

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Morton Grove Chamber of Commerce**

Mailing Address 6101 Capilina

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2014

City	State	Zip Code
Morton Grove	IL	60053

Amount of Each Disbursement this Period

500.00	180.00
--------	--------

**Transaction ID : SB17.9865**Purpose of Disbursement  
Membership Dues

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Northbrook Chamber of Commerce**

Mailing Address 2002 Walters Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		26		2014

City	State	Zip Code
Northbrook	IL	60062

Amount of Each Disbursement this Period

75.00
-------

**Transaction ID : SB17.9867**Purpose of Disbursement  
Event Admission

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Park Ridge Chamber of Commerce**

Mailing Address 32 Main Street #B

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2014

City	State	Zip Code
Park Ridge	IL	60068

Amount of Each Disbursement this Period

250.00
--------

**Transaction ID : SB17.9868**Purpose of Disbursement  
Membership Dues

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

505.00
--------

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**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 64

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Skokie Chamber of Commerce**

Mailing Address 5102 Oakton

City	State	Zip Code
Skokie	IL	60077

Purpose of Disbursement  
Membership Dues

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2014

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : SB17.9869

**B. Tuite, Jacque**

Mailing Address 2212 W. Palmer

City	State	Zip Code
Chicago	IL	60647

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2014

Amount of Each Disbursement this Period

1543.50
---------

Transaction ID : SB17.9870

**c. Tuite, Jacque**

Mailing Address 2212 W. Palmer

City	State	Zip Code
Chicago	IL	60647

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2014

Amount of Each Disbursement this Period

771.75
--------

Transaction ID : SB17.9872

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2565.25

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Tuite, Jacque**

Mailing Address 2212 W. Palmer

City	State	Zip Code
Chicago	IL	60647

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

Amount of Each Disbursement this Period

771.75
--------

Transaction ID : SB17.9871

**B. Tuite, Jacque**

Mailing Address 2212 W. Palmer

City	State	Zip Code
Chicago	IL	60647

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2014

Amount of Each Disbursement this Period

771.75
--------

Transaction ID : SB17.9873

**c. U.S. Postal Service**

Mailing Address 1101 Davis

City	State	Zip Code
Evanston	IL	60201

Purpose of Disbursement  
Post Box Rental

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2014

Amount of Each Disbursement this Period

100.00
--------

Transaction ID : SB17.9874

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1643.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**SCHAKOWSKY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Wheeling/Prospect Heights Chamber of Commerce**

Mailing Address 2 Community Blvd., Suite 203

City	State	Zip Code
Wheeling	IL	60090

Purpose of Disbursement  
Membership Dues

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : SB17.9876

**B. Wheeling/Prospect Heights Chamber of Commerce**

Mailing Address 2 Community Blvd., Suite 203

City	State	Zip Code
Wheeling	IL	60090

Purpose of Disbursement  
Event Admissions

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

Amount of Each Disbursement this Period

70.00
-------

Transaction ID : SB17.9875

**c. Wide Eye Creative**

Mailing Address 411 Smith Street

City	State	Zip Code
Brooklyn	NY	11231

Purpose of Disbursement  
Website Maintenance

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2014

Amount of Each Disbursement this Period

715.00
--------

Transaction ID : SB17.9877

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

985.00



